DMV-44 REV 07/11



CURRENT LICENSE PLATE	1	VIN NUMBER					DO NOT WRITE IN THIS BOX • FOR DMV USE ONLY		
							CLASS:	EXPIRATION DATE:	
MAKE	YEAR	WEIGHT	-	BODY STYLE		IMBER	OWNER'S STATEMENT OF INSURANCE		
					DRIVING WITHOUT AUT				
NAME(S) EXACTLY AS SHO									
CHECK THIS BOX IF YOUR ADDRESS HAS CHANGED							NAME OF INSURANCE AGENCY		
CURRENT STREET ADDRESS							NAME OF INSURANCE AGENT		
							POLICY NUMBER		
СІТҮ		COUNTY			STATE	ZIP	VALID / / /		
							FROM: / / TO:	1 1	NAIC NUMBER
CLASS A DESIGNATION FEES AND INSTRUCTIONS OF							I hereby state, under penalty of false swearing and penalties provided for in		
CLASS A REGISTRATION FEES AND INSTRUCTIONS (For cars and trucks under 8001 lbs. GVW, standard)							Chapters 17A and D of the West VEHICLE LIABILITY POLICY upo	/irginia Code, tha	t there is in effect a MOTOR
All vehicle insurance information must be completed. Your personal				ection below:	M	AIL TO:	with provisions of the West Virg		rivea nerein, in accordance
property tax receipt	or exemption		\$30.00 for O			V DMV	(X) OWNER SIGNATURE		/ /
from your county cou	urthouse must		\$60.00 for T) Box 17110	(X)		/ /
be enclosed.			Add \$10.00 for Scenic Plate		Charleston, WV 25317		OWNER SIGNATURE		DATE